



U.S. Department
of Transportation
**National Highway
Traffic Safety
Administration**

Auto Safety Hotline

Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-9393
DC METRO AREA (202) 366-0123
INTERNET: <http://www.nhtsa.dot.gov>

FOR AGENCY USE ONLY 1039

Date Received

31-AUG-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

895607

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☐ YES ☐ NO
In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.

Signature of Owner _____ Date ____/____/____

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Location at bottom of windshield and driver's side door)		Vehicle Make NISSAN	Vehicle Model MAXIMA	Vehicle Year 1999	Current Odometer Reading
Purchase Date ☐ New ☒ Used	Dealer's Name _____ City _____ State _____ Zip Code _____		Engine Size (CID/CC/L) _____ No Cylinders _____	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection	
Transmission Type ☐ Manual ☐ Automatic	Antilock Brakes ☐ Yes ☒ No	Restraint System ☐ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Bel ☐ Passengerside Airbag	Cruise Control ☐ Yes ☒ No	Drive Train ☐ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☐ Car ☐ Sport Util ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____ Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 08510000	Part Name(s) ELECTRICAL SYSTEM:IGNITION:SWITCH	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Date(s) of Failure(s) 25-FEB-2001 Mileage at Failure(s) 37	Failed Part(s) ☐ Yes ☐ No	NHTSA Previously ☐ Yes ☐ No

APPLICATION INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies) on the back of this form)

Crash ☐ Yes ☒ No	Fire ☐ Yes ☒ No	Number of Persons Injured	Number of Fatalities	Estimated Property Damag	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

CONSUMER CANNOT START VEHICLE WITH KEY.KEY WILL NOT TURN IGNITION SWITCH. CONSUMER STATED THIS IS WAS ORIGINAL KEY RECEIVED WITH VEHICLE. CONSUMER CONTACTED DEALER, AND DEALER HAD TO RECODE KEY. PLEASE ADD VIN #AK

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The Privacy Act of 1974-Public Law 93-579 This information is requested pursuant to authority vested in the National Highway Traffic Safety Act and subsequent amendments. You are under no obligation to respond to this questionnaire. Your response may be used to assist the NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If the NHTSA proceeds with administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

 U.S. Department of Transportation National Highway Traffic Safety Administration		DOT Auto Safety Hotline Vehicle Owner's Questionnaire (VOQ) NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 1639 Date Received _____ 31-AU-3-2001 Reference No. 895607 Work Number _____ Home Number _____	
OWNER INFORMATION (Type or Print) [Redacted] 712414				Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☒ YES ☐ NO In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer. Signature of Owner [Redacted] Date 01/11/2002	
VEHICLE INFORMATION					
Vehicle Ident. No. (VIN) <i>1N1CA21D9XM409014</i> (Located on front windshield on driver's side)		Vehicle Make <i>NISSAN</i>		Vehicle Year <i>1999</i>	
Purchase Date <i>01/02/1999</i> ☐ New ☒ Used		Dealer's Name <i>Tamaroff Buick, INC</i> City <i>Sixtfield</i> State <i>MI</i> Zip Code <i>48034</i>		Engine Size (CID/CC/L) <i>3.0</i> No. Cylinders <i>6</i> ☐ Turbo Diesel Gas ☒ Fuel Injection	
Transmission Type ☐ Manual ☒ Automatic		Antilock Brakes ☐ Yes ☒ No		Restraint System ☒ 3-Point Belt ☐ Motorbelt ☒ Driverside Airbag ☐ 2-Point Belt ☒ Passengerside Airbag	
Cruise Control ☒ Yes ☐ No		Drive Train ☒ Front ☐ Rear ☐ 4-Wheel		Vehicle Type ☒ Car ☐ Sport Utility Truck ☐ Van ☐ Minivan ☐ Motorcycle ☐ Other	
Body Style ☐ 2-Door ☒ 4-Door ☐ Station Wagon ☐ Pick Up ☐ Truck		FAILED COMPONENT(S)/PART(S) INFORMATION			
Component <i>08510000</i>		Part Name(s) <i>ELECTRICAL SYSTEM:IGNITION:SWITCH</i>		Location ☐ Left ☐ Right ☐ Front ☐ Rear	
No. of Failures _____		Date(s) of Failure(s) <i>25-FEB-2001</i> Mileage at Failure(s) <i>20K</i> Vehicle Speed at Failure(s) _____		Failed Part(s) ☒ Yes ☐ No	
NHTSA Previously ☐ Yes ☒ No		APPLICATION INCIDENT INFORMATION (Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies) on the back of this form)			
Crash ☐ Yes ☒ No		Fire ☐ Yes ☒ No		Number of Persons Injured _____	
Number of Fatalities _____		Estimated Property Damage _____		Reported to Police ☐ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES) CONSUMER CANNOT START VEHICLE WITH KEY. KEY WILL NOT TURN IN IGNITION SWITCH. CONSUMER STATED THIS IS WAS ORIGINAL KEY RECEIVED WITH VEHICLE. CONSUMER CONTACTED DEALER, AND DEALER HAD TO RECODE KEY. PLEASE ADD VIN #AK VIN: 1N1CA21D9XM409014 Defect 1 - I could not start the vehicle with the original keys from manufacturer. Dealer had to recode the keys, which costs more than \$100. The vehicle was					

CONTINUE ON BACK IF NEEDED

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INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)

TIRE IDENTIFICATION NO.

0 | 0 | 7

MANUFACTURER/TIRE NAME

SIZE

* The identification number consists of 7 to 10 letters and numerals following the letters DOT. It is usually located near the rim flange on the side opposite the whitewall or on either side of a blackwall tire.

NARRATIVE DESCRIPTION (CONTINUED)

in warranty at that time, but the manufacturer simply refused to pay for that. They said it was my fault to make the keys not working well. But remember, I have kept the spare key untouched ever since I bought the car.

Defect 2: Sometime, there is strong odor inside the car.

* U.S. G.P.O.: 1952-623-847 / 55706



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